

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 14, 2008 08:00 AM
Secretary of State

DOCUMENT # L00000013245 1. Entity Name DADE PINE PARTNERS LLC	
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Principal Place of Business 7236 SW 56TH AVE MIAMI, FL 33143	Mailing Address 3272 MATILDA ST COCONUT GROVE, FL 33133
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DO NOT WRITE IN THIS SPACE



01102008No Chg-LLC CR2E083 (12/07)

4. FEI Number 65-1050533	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent STONE, ADELE I ESQUIRE % ATKINSON, DINER, STONE, PLOUCHA ET AL. 1 FINANCIAL PLAZA SUITE 1400 FT. LAUDERDALE, FL 33394
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**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM ADAMS, MAURICE 3272 MATILDA STREET COCONUT GROVE, FL 33133
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM ADAMS, ELIZABETH G 3272 MATILDA STREET COCONUT GROVE, FL 33133
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01/16/08-80009-023 138.75

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:  **1/10/08** **3054797069**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #